

Ionizing Radiation Division		IRD-G-08
CORRECTIVE ACTION		

## CORRECTIVE ACTION PLAN

SOURCE OF DETERMINATION OF NEED FOR CORRECTIVE ACTION:

ROOT CAUSE OF PROBLEM

DATE

Investigator

CORRECTIVE ACTION

Group Leader Approval \_\_\_\_\_

MONITORED RESULTS

PROBLEM IS RECTIFIED

Investigator \_\_\_\_\_

Date \_\_\_\_\_

Group Leader \_\_\_\_\_

Date \_\_\_\_\_

Quality Manager \_\_\_\_\_

Date \_\_\_\_\_